### September 2005



## **MEDICARE HEALTH PLANS**

# (Formerly called MEDICARE ADVANTAGE or MEDICARE+CHOICE plans)

### offered in Washington State

Always check with the plan for current information and premiums. There are limited enrollment opportunities in some counties.

Plan	Type of Plan	Copayment Information	Additional Information (See "Key" on last page)	Counties Served/ Monthly Premium
Asuris Northwest Health Asuris Northwest Health MedAdvantage 1-800-541-8981 www.asurisnorthwesthealth.c om	Preferred Provider Organization	Office Visit= \$5 *Routine Exam=\$5 ER Visit= \$ 50 (waived if admitted) Hospital Stay= \$100	DS, EE, EG, HE, Nurse Hotline, Worldwide Emergency Coverage. No referrals are required to see specialist.	□ Spokane \$89
Columbia Community Care - Plus 1-800-573-8609 www.columbiacommunitycar e.com	Managed Care	Office Visit=\$20 Specialist Visit =\$35 *Routine Exam=\$20 ER Visit=\$50 (waived if admitted) Hospital Stay= \$150/day (1 <sup>st</sup> - 5 <sup>th</sup> day)	EE, EG, Worldwide Emergency Coverage	□ Benton, Franklin, Spokane \$25
Columbia Community Care  – Premier 1-800-573-8609 www.columbiacommunitycar e.com	Managed Care	Office Visit=\$15 Specialist Visit =\$35 *Routine Exam=\$15 ER Visit=\$50 (waived if admitted) Hospital Stay= \$150/day (1st - 5th day)	EE, EG, Rx, Worldwide Emergency Coverage	□ Benton, Franklin, Yakima \$50

Plan	Type of Plan	Copayment Information	Additional Information (See "Key" on last page)	Counties Served/ Monthly Premium	
Group Health Cooperative GHC Medicare Plan Basic Benefits 1-888-901-4636 www.ghc.org	Managed Care	Office Visit= \$10 *Routine Exam=\$0 (once every 2 years) ER Visit= \$50 (waived if admitted) Hospital Stay= \$100 (1 <sup>st</sup> - 3 <sup>rd</sup> day)	EE, EG, FT, HE, HA, SC, \$1,000 OOP, POS, Out- of-Service-area care, Worldwide Emergency Coverage	<ul> <li>□ Island, Kitsap, San         Juan, Skagit,         Snohomish, parts of         Grays Harbor,         Whatcom \$119</li> <li>□ King, Lewis, Mason,         Pierce, Thurston \$94</li> </ul>	
Group Health Cooperative GHC Medicare Plan Basic Benefits + Optional Supplemental Benefits 1-888-901-4636 www.ghc.org	Managed Care	Office Visit=\$15 *Routine Exam=\$0 (once every 2 years) ER Visit= \$50 (waived if admitted) Hospital Stay= \$100 (1 <sup>st</sup> - 3 <sup>rd</sup> day)	All Basic Benefits + DS, Additional Home Care and SNF coverage	<ul> <li>□ Island, Kitsap, San Juan, Skagit, Snohomish, Whatcom, parts of Grays Harbor \$144</li> <li>□ King, Lewis, Mason, Pierce, Thurston \$119</li> </ul>	
Health Net Option Plus 1-800-822-7698 www.healthnet.com	Preferred Provider Organization	Office Visit=\$10 *Routine Exam=\$0 ER Visit=\$50 Hospital Stay=\$100	DS, EE, EG, Alternative Medicine, Disease Management, Worldwide Emergency Coverage	□ Clark \$53	
Kaiser Permanente NW Senior Advantage 1-800-813-2000 www.kaiserpermanente.org	Managed Care	Office Visit=\$15 *Routine Exam=\$15 (once every 2 years) ER Visit=\$50 Hospital Stay=\$200	EE, EG, HE, FT, SC, Rx, \$1,000 OOP Worldwide Emergency Coverage	<ul><li>□ Cowlitz, Lewis, Wahkiakum \$127</li><li>□ Clark \$94</li></ul>	
Kaiser Permanente NW Senior Advantage II 1-800-813-2000 www.kaiserpermanente.org	Managed Care	Office Visit=\$15 *Routine Exam=\$15 (once every 2 years) ER Visit= \$50 Hospital Stay= \$200	EE, EG, HA, HE, FT, Rx, SC, Expanded Care benefit, \$1,000 OOP, Worldwide Emergency Coverage	□ Clark \$210	

Plan	Type of Plan	Copayment Information	Additional Information (See "Key" on last page)	Counties Served/ Monthly Premium		
PacifiCare of Washington Secure Horizons Standard Plan 1-800-255-6673 www.securehorizons.com	Managed Care	Office Visit=\$15 Specialist Visit: \$30, (\$25 for Snohomish & parts of Island) *Routine Exam=\$15 ER Visit=\$50 Hospital Stay= \$200/day (1 <sup>st</sup> -4 <sup>th</sup> day)	EE, EG, HA, HE, SC Worldwide Emergency Coverage	□ King , Pierce, Snohomish, parts of Island, Thurston, Lewis \$95		
PacifiCare of Washington Secure Horizons Standard Plan 1-800-385-5588 www.securehorizons.com	Managed Care	Office Visit=\$10 Specialist Visit: \$20 *Routine Exam=\$10 ER Visit=\$50 Hospital Stay= \$100/day (1st-8th day)	Rx, Worldwide Emergency Coverage	□ Cowlitz \$40		
PacifiCare of Washington Secure Horizons 1-800-255-6673 www.securehorizons.com	Managed Care	Office Visit=\$10 Specialist Visit: \$20 *Routine Exam=\$10 ER Visit=\$50 Hospital Stay= \$100/day (1 <sup>st</sup> -8 <sup>th</sup> day)	EE, EG, HA, HE, SC Worldwide Emergency Coverage	□ Clark \$77		
PacifiCare of Washington Secure Horizons Value Plan 1-800-255-6673 www.securehorizons.com	Managed Care	Office Visit=\$15 Specialist Visit=\$30 *Routine Exam=\$15 ER Visit=\$50 Hospital Stay=\$200/day (1 <sup>st</sup> - 4 <sup>th</sup> day)	Rx, EE, EG, HA, HE, SC Worldwide Emergency Coverage *Selected provider groups	□ King, Lewis, Pierce, Thurston \$75		

Plan	Type of Plan	Copayment Information	Additional Information (See "Key" on last page)	Counties Served/ Monthly Premium		
PacifiCare of Washington Secure Horizons Secure Horizons Direct 1-800-776-8876 www.securehorizons.com	Private Fee For Service	Office Visit=\$12 Specialist Visit=\$25 *Routine Exam=\$0 ER Visit=\$50 Hospital Stay=\$175/day (1 <sup>st</sup> – 7 <sup>th</sup> day)	\$5,000 OOP in network , EE, EG, Worldwide Emergency Coverage	□ Clallam, Columbia, Island, Kitsap, Kittitas, Klickitat, Pierce, San Juan, Skamania, Snohomish, Spokane, Wahkiakum, Walla Walla, Whatcom, Yakima \$0 □ Clark, Cowlitz, King, Stevens, Thurston \$25		
Providence Health Plan Providence Medicare Extra Plan 1 1-800-988-0088 www.providence.org	Managed Care	Office Visit=\$15 Specialist Visit=\$15 *Routine Exam=\$15 ER Visit=\$50 (waived if admitted in 24 hours) Hospital Stay= \$250/stay (\$500 max per year)	EE, Disease Management, Nursing Hotline, Nutritional Training, Smoking Cessation, Worldwide Emergency Coverage	□ Mason \$45 □ Clark \$86		
Providence Health Plan Providence Medicare Extra Plan 2 1-800-988-0088 www.providence.org	Managed Care	Office Visit=\$20 Specialist Visit=\$20 *Routine Exam=\$20 ER Visit=\$50 (waived if admitted in 24 hours) Hospital Stay= \$325/stay	EE, Disease Management, Nursing Hotline, Nutritional Training, Smoking Cessation, Worldwide Emergency Coverage	□ Clark \$56		

Plan	Type of Plan	Copayment Information	Additional Information (See "Key" on last page)	Counties Served/ Monthly Premium		
Regence BlueShield 1-800-541-8981 www.wa.regence.com	Preferred Provider Organization	Office Visit=\$5 Specialist Visit=\$5 *Routine Exam=\$5 ER Visit=\$50 (waived if admitted within 48 hours) Hospital Stay= \$100/day (1st - 3rd day)	DS, EE, EG, Health Ed Classes, Nursing Hotline, \$1,500 OOP in-network, \$3,000 OOP out of network, Worldwide Emergency Coverage	□ Clallam, King, Kitsap, Pierce, Skagit, Snohomish, Thurston Whatcom, Yakima \$99		
Regence BlueCross BlueShield of Oregon 1-800-452-2909 www.or.regence.com	Preferred Provider Organization	Office Visit=\$5 Specialist Visit=\$5 *Routine Exam=\$5 ER Visit=\$50 Hospital Stay=\$100/day (1 <sup>st</sup> - 3 <sup>rd</sup> day)	DS, EE, EG, Health Ed Classes, Nursing Hotline, Worldwide Emergency Coverage,	□ Clark \$79		
Regence HMO of Oregon First Choice 65 1-800-541-8981 www.bcbso.com	Managed Care	Office Visit=\$20 Specialist Visit=\$20 *Routine Exam=\$20 ER Visit=\$50 (waived if admitted) Hospital Stay= \$100/day (1 <sup>st</sup> - 8 <sup>th</sup> day)	EE, EG, Congestive Health Programs, Disease Management, Health Ed Classes, Nutritional Training, Worldwide Emergency Coverage	□ Clark \$69		
Spokane Community Care Basic 1-800-573-8609 www.spokanecommunitycar e.com	Managed Care	Office Visit=\$15 Specialist Visit =\$30 *Routine Exam=\$15 ER Visit=\$50 Hospital Stay= \$150/day (1st - 5th day)	EE, EG, Worldwide Emergency Coverage	□ Spokane \$0		

Plan	Type of Plan	Copayment Information	Additional Information (See "Key" on last page)	Counties Served/ Monthly Premium	
Spokane Community Care Plus 1-800-573-8609 www.spokanecommunitycar e.com	Managed Care	Office Visit=\$20 Specialist Visit =\$35 *Routine Exam=\$20 ER Visit=\$50 Hospital Stay= \$150/day ( 1 <sup>st</sup> - 5 <sup>th</sup> day)		□ Spokane \$17	
Spokane Community Care Premier 1-800-573-8609 www.spokanecommunitycar e.com	Managed Care	Office Visit=\$10 Specialist Visit =\$25 *Routine Exam=\$10 ER Visit=\$50 Hospital Stay= \$100/day (1st - 5th day)	EE, EG, Rx, Worldwide Emergency Coverage	□ Spokane \$48	
Sterling Life Insurance Co. Sterling Option 1 1-888-858-8572 www.sterlingplans.com	Private Fee- For-Service (PFFS) Plan	Office Visit=\$15 Specialist Visit=\$25 *Routine Exam=\$0 ER visit=\$50 (waived if admitted) Hospital Stay= \$150/day (1 <sup>st</sup> – 5 <sup>th</sup> day)	EE, HE, Nursing Hotline, Disease Management, Worldwide Emergency Coverage  Can self-refer to specialists who accept the Sterling Option I Plan,	□ All Washington Counties \$38	
United Healthcare Insurance Company Evercare Choice 1-866-266-0636 www.evercareonline.com http://fortress.wa.gov/dshs/maa/mmip/	Managed Care	Office Visit=\$0 Specialist Visit=\$0 *Routine Exam=\$0 ER visit=\$0 (waived if admitted) Hospital Stay=\$0	*This plan is part of the Medicare/Medicaid Integration Project and only offers to people who have both Medicare and Medicaid. Contact plan for more information.	□ King, Pierce, Snohomish \$0	

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United Healthcare Insurance Company Evercare Premier 1-866-266-0636 www.evercareonline.com http://fortress.wa.gov/dshs/maa/mmip/	Managed Care	Office Visit=\$0 Specialist Visit=\$0 *Routine Exam=\$0 ER visit=\$0 Hospital Stay=\$0	*This plan is part of the Medicare/Medicaid Integration Project and only offers to people who have both Medicare and Medicaid. Contact plan for more information.	□ King, Pierce \$0

This is only an overview. Consult plan contract for details. Most benefits are subject to Medicare guidelines. Contact plan for enrollment details.

Additional Medicare Health Plan Information is available at Medicare's web site: <a href="www.medicare.gov">www.medicare.gov</a>
The inclusion of a company on this list does not constitute an endorsement of a company or its policies by the Washington State Insurance Commissioner's Office, SHIBA HelpLine or its volunteers.

Visit our web page at www.insurance.wa.gov

#### **KEY**

DS	Dental Service	EE	Eye Exam
EG	Eye Glasses	FT	Fitness Classes and/or Health Club Membership
НА	Hearing Aid	HE	Hearing Exam
ООР	Out-of-Pocket (maximum per year)	POS	Point of Service- member responsible for coinsurance, deductibles and OOP
Rx	Prescription Drugs	sc	Smoking Cessation
SNF	Skilled Nursing Facility Care	*	If your Medicare coverage begins on or after January 1 <sup>st</sup> , 2005, you may receive a one-time physical exam within the first six months.